PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number				
Effective December 8, 2004 CLAIMS AS FILED - PART I								N/520636					
L		CLAIMS		- PART	(Column 2)			SMALL EI	YTITY	OF	OTHE	R THAN ENTITY	
U.S. NATIONAL STAGE FEES				37				RATE	FEE	7	RATE	FEE	
BASIC FEE			SMALL EA	SMALL ENT. = \$ 150		LARGE ENT. =\$ 300		BASIC FEE		OR	BASIC FEE	+	
EXAMINATION FEE				Satisfies PCT Article 33(1)- (4) = \$50/\$100		All other situations = \$ 100 / \$ 200		EXAM. FEE	1	1	EXAM, FEE	300	
SEARCH FEE			. ALL other c	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	700	
FEE FOR EXTRA SPEC. PGS.			mi	minus 100 =		/ 50 =		X \$ 125 =		1	X \$ 250 =	100	
TOTAL CHARGEABLE CLAIMS			37	37minus 20 = .		.17		X \$ 25 =	 	OR		CEA	
INDEPENDENT CLAIMS			1	/ minus 3 = .				X \$ 100 =		OR	<u> </u>	850	
MULTIPLE DEPENDENT CLAIM PRE			ESENT	N			İ	+ \$ 180 =	 	OR	+ \$ 360 =	-	
* If the difference in column 1 is less than zero, enter *0" in column						oluma 2	Ł	TOTAL	 	OR	TOTAL	750	
<u> </u>	<u>-ŋ-05</u>	CLAIMS AS (Column 1) CLAIMS REMAINING AFTER	AMENDE	(Column 2) (Column 3) HIGHEST NUMBER PRESENT			ſ	SMALL I	ADDI- TIONAL	OTHER THAN OR SMALL ENTITY ADDI-			
AMENDMENT /		AMENDMENT		PAID F		EXTRA	L	IVIE	FEE		RATE	TIONAL FEE	
	Total		Minus	**			L	X \$ 25 =		OR	X \$ 50 =		
	Independent	DENT	Minus	***		1		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+ \$ 180 =		OR	+ \$ 360 =	7	
										OR	TOTAL ADDIT. FEE		
		(Column 1)		(Column	n 2)	(Column 3)		•			٠		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		s		X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	***		=	1	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						T.	\$.180 =		OR	+ \$ 360 =	-	
										OR	TOTAL ADDIT. FEE		
*** E	" If the entry in column 1 is less than the entry in column 2, write "O" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20", enter "20".												

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